



## Complete Summary

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### TITLE

Child health: percent of children who received at least one non-HealthCheck, well-child examination or at least one non-HealthCheck, non-well-child encounter in the look-back period (MEDDIC-MS SSI).

### SOURCE(S)

Department of Health and Family Services, Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS SSI. Medicaid encounter data driven improvement core measure set for SSI managed care. Madison (WI): State of Wisconsin; 2002 Dec 1. 30 p.

## Brief Abstract

### DESCRIPTION

This measure uses current and previous (if applicable) Health Maintenance Organization (HMO) claims/encounter data, Fee-For-Service (FFS) Medical Evaluation & Decision Support (MEDS) data and Department of Public Health (DPH) data to determine the percent of children included in the denominator age cohort who received at least one non-HealthCheck\* well-child examination. Services provided by non-network provider(s) are counted in the numerator if reported in encounter data.

\*EPSDT services are required under federal law for individuals under age 21 years served in the Medicaid program. In Wisconsin, EPSDT services are referred to as HealthCheck.

### RATIONALE

The positive effects of well-child services were reported in a study of Medicaid data from three states published in 2001 (Hakim, Bye; Pediatrics; 2001 Jul). Researchers studied children in Medicaid in the first 2 years of life because it is the time of the most intense use of primary care services. According to the authors, frequency of well-child services decreases after age 2.

The study found:

- California had the highest percentage (30%) of children with five or more well-child visits in the two-year study period of the states included, and the lowest rate of avoidable hospitalizations (70/1,000).
- Michigan had the second highest percentage (22%) of children with five or more well-child visits in the study period, and the second lowest rate of preventable hospitalizations (120/1,000).

- Georgia had the lowest percentage (15%) of children with five or more well-child visits in the study period and the highest rate of preventable hospitalizations (160.9/1,000).

The authors concluded that the "association between preventive care and a reduction in avoidable hospitalizations was robust and was consistent across the states and racial and ethnic groups. (Even among children who were not up-to-date with well-child visits, infrequent preventive care visits resulted in a mild benefit.)"

## PRIMARY CLINICAL COMPONENT

Child health; access; ambulatory and well-child examination

## DENOMINATOR DESCRIPTION

Supplemental Security Income (SSI) enrollees age 15 to 20 years continuously enrolled for at least 304 days immediately prior to the measure end date with no more than one gap in enrollment of not more than 45 days. The enrollee must have a total of not less than 259 enrolled days in the look-back period.

## NUMERATOR DESCRIPTION

Children who received at least one non-HealthCheck, well-child examination or who received at least one non-HealthCheck, non-well-child encounter (i.e., acute illness; non-preventive and not routine physical exam) in the look-back period. Services provided by non-network provider(s) are counted in the numerator when identified from Department of Public Health (DPH) or other Department of Health and Family Services (DHFS) databases or identified in encounter data (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary).

## Evidence Supporting the Measure

### PRIMARY MEASURE DOMAIN

Access

### SECONDARY MEASURE DOMAIN

Process

### EVIDENCE SUPPORTING THE MEASURE

A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences  
A systematic review of the clinical literature

## Evidence Supporting Need for the Measure

### NEED FOR THE MEASURE

Use of this measure to improve performance

## EVIDENCE SUPPORTING NEED FOR THE MEASURE

Division of Health Care Financing, Bureau of Managed Health Care Programs.  
MEDDIC-MS SSI 2002 data book. Medicaid encounter data driven improvement  
core measure set SSI managed care: Wisconsin Independent Care (icare)  
program. Madison (WI): State of Washington, Department of Health and Family  
Services; 2004 May. 19 p.

## State of Use of the Measure

### STATE OF USE

Current routine use

### CURRENT USE

Decision-making by consumers about health plan/provider choice  
External oversight/Medicaid  
External oversight/State government program  
Internal quality improvement

## Application of Measure in its Current Use

### CARE SETTING

Managed Care Plans

### PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses  
Physicians

### LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

### TARGET POPULATION AGE

Age 15 to 20 years

### TARGET POPULATION GENDER

Either male or female

### STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

## Characteristics of the Primary Clinical Component

### INCIDENCE/PREVALENCE

Unspecified

### ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

### BURDEN OF ILLNESS

Unspecified

### UTILIZATION

Unspecified

### COSTS

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

### IOM CARE NEED

Getting Better  
Staying Healthy

### IOM DOMAIN

Effectiveness

## Data Collection for the Measure

### CASE FINDING

Both users and nonusers of care

### DESCRIPTION OF CASE FINDING

Supplemental Security Income (SSI) enrollees age 15 to 20 years continuously enrolled for at least 304 days immediately prior to the measure end date\* with no more than one gap in enrollment of not more than 45 days. The enrollee must have a total of not less than 259 enrolled days in the look-back period.\*\*

\*Measure end date: The last date by which measured services can be rendered to be included in the measure numerator.

Measure data extraction date: The date(s) determined by the department for extraction of data from the data warehouse for the purposes of reporting the measure. This will be at least 182 days after the measure end date. If Department of Public Health (DPH) service data is to be included in the numerator, data extraction will occur subsequent to the completion of the quarterly update of DPH data for the most recent complete quarter that includes services provided up to the measure end date.

\*\*Measure look-back period: 12 months (365 days) from the measure end date.

## DENOMINATOR SAMPLING FRAME

Enrollees or beneficiaries

## DENOMINATOR (INDEX) EVENT

Patient Characteristic

## DENOMINATOR INCLUSIONS/EXCLUSIONS

### Inclusions

Supplemental Security Income (SSI) enrollees age 15 to 20 years continuously enrolled for at least 304 days immediately prior to the measure end date with no more than one gap in enrollment of not more than 45 days. The enrollee must have a total of not less than 259 enrolled days in the look-back period.

### Exclusions

Unspecified

## NUMERATOR INCLUSIONS/EXCLUSIONS

### Inclusions

Children who received at least one non-HealthCheck, well-child examination or who received at least one non-HealthCheck, non-well-child encounter (i.e., acute illness; non-preventive and not routine physical exam) in the look-back period.\* Services provided by non-network provider(s) are counted in the numerator when identified from Department of Public Health (DPH) or other Department of Health and Family Services (DHFS) databases or identified in encounter data.

\*Clinical Criteria: Current Procedure Terminology (CPT-4 and CPT 2001) codes: 99201-99205, 99211-99215, without V-codes required for acceptance as a HealthCheck encounter, 99241-99245, 99271-99275, 99381-99385, 99391-99395.

### Exclusions

Unspecified

## DENOMINATOR TIME WINDOW

Time window precedes index event

## NUMERATOR TIME WINDOW

Fixed time period

## DATA SOURCE

Administrative data

## LEVEL OF DETERMINATION OF QUALITY

Individual Case

## PRE-EXISTING INSTRUMENT USED

Unspecified

## Computation of the Measure

## SCORING

Rate

## INTERPRETATION OF SCORE

Better quality is associated with a higher score

## ALLOWANCE FOR PATIENT FACTORS

Unspecified

## STANDARD OF COMPARISON

External comparison of time trends  
Internal time comparison

## Evaluation of Measure Properties

## EXTENT OF MEASURE TESTING

This measure was tested and validated by an independent third party and subject to internal review in 2002 for Medicaid Encounter Data Driven Improvement Core Measure Set (MEDDIC-MS). Modifications made to base measure for Supplemental Security Income (SSI) do not affect measure accuracy or validity.

## EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Innovative Resources Group (IRG). Measure testing/validation reports for MEDDIC-MS. Brookfield (WI): Innovative Resources Group (IRG); 2002.

## Identifying Information

## ORIGINAL TITLE

Child health: non-HealthCheck ambulatory and well-child encounters, by age cohort.

#### MEASURE COLLECTION

[MEDDIC-MS \(Medicaid Encounter Data Driven Improvement Core Measure Set\). Rapid-cycle performance improvement measures system for Medicaid managed care.](#)

#### MEASURE SET NAME

[MEDDIC-MS SSI \(Medicaid Encounter Data Driven Improvement Core Measure Set for Supplemental Security Income\). Measures applicable to SSI managed care population.](#)

#### MEASURE SUBSET NAME

[Monitoring Measures -- SSI](#)

#### DEVELOPER

State of Wisconsin, Department of Health and Family Services

#### ADAPTATION

Measure was not adapted from another source.

#### RELEASE DATE

2002 Dec

#### MEASURE STATUS

This is the current release of the measure.

#### SOURCE(S)

Department of Health and Family Services, Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS SSI. Medicaid encounter data driven improvement core measure set for SSI managed care. Madison (WI): State of Wisconsin; 2002 Dec 1. 30 p.

#### MEASURE AVAILABILITY

The individual measure, "Child health: Non-HealthCheck Ambulatory and Well-child Encounters, by Age Cohort," is published in "Medicaid Encounter Data Driven Improvement Core Measure Set for SSI Managed Care (MEDDIC-MS SSI)."

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#### COMPANION DOCUMENTS

The following is available:

- Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS SSI 2002 data book. Medicaid encounter data driven improvement core measure set SSI managed care: Wisconsin Independent Care (icare) program. Madison (WI): State of Washington, Department of Health and Family Services; 2004 May. 19 p. This document is available in Portable Document Format (PDF) from the [Wisconsin Medicaid Managed Care Web site](#).

#### NQMC STATUS

This NQMC summary was completed by ECRI on February 3, 2005. The information was verified by the measure developer on February 7, 2005.

#### COPYRIGHT STATEMENT

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